PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09835115

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OR	OTHER THAN	
TOTAL CLAIMS			,				RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NIIMR	SER EXTRA	BASIC FEE		$\left \frac{1}{2} \right $	BASIC FEE	
			0		NOWBEREATHA		DAGIO I EL	355.00		BASIC , EL	710.00
TOTAL CHARGEABLE CLAIMS			minus 20=		. 6		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		<u> </u>	0'	X40=		OR	X80=	
ML	JLTIPLE DEPEN	NDENT CLAIM PI	RESENT				+135=		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" i			olumn 2	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II									•	OTHER	THAN
(Column 1)			_	(Column		(Column 3)	SMALL	ENTITY	OR	SMALL	ENTITY
FINT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X40=		OR	X80=	
L	FIRST PRESE	ENTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		125		1	+270=	
							+135=		OR		
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1) CLAIMS		(Colun		(Column 3)	<u></u>		- ,		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVICE PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total		Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	. 01 4 144	=	X40=		OR	X80=	
	HHOI PHESE	ENTATION OF MU	LIPLE DEP	'ENDEN I	CLAIM		+135=		OR	+270=	
							TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)	-	(Colun		(Column 3)			_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	•	Minus	**		=	X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus	***		=	X40=		ŀ	X80=	
<	FIRST PRESE	NTATION OF MU	LTIPLE DEPENDENT		CLAIM		A40-		OR	700-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+135=		OR	+270=	
** 1	If the "Highest Nur	mber Previously Pa Imber Previously Pa	id For" IN THIS	S SPACE is	s less than	n 20, enter "20."	TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT, FEE	
		nber Previously Paid					ound in the app	ropriate box	c in coli	umn 1.	Į